

Work Order ID 98724

March-21-13 12:40:40 PM

98724

Page 1

Item ID: 647.1401

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Upper Cutter Assembly

Start Date: 3/21/13 Start Qty: 2.00

2

Cust Item ID:

Required Date: 4/04/13 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan: MJS

Date: 13-03-21 Tooling:

Date:

Run Start

NR1

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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647.1400	N/C
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110	Pick Kit	0.00
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110		
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Packaging	Memo	0.00
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Packaging		
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	13-03-27
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120		0.00
-----	--	------

120		
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Small Fab	Memo	0.00
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Small Fab		
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	Assemble as per dwg and apply loctite 598 on all mating surfaces per note 2.	
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A/R LOCTITE 598:	124993	
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	13-03-27	
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	pto ->	
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130		0.00
-----	--	------

130		
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QC	Memo	0.00
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Quality Control		
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DAS	16	
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	3/3/20	
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ATG

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA *Auth* Date: 13/04/08QA Closed: *CL* Date: 13/4/2

Work Order:	98724				DISPOSITION	AGAINST DEPARTMENT/PROCESS					
Part No.:	647.1401				Rework <input checked="" type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>		
NCR No.:	13-2445				Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input checked="" type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>		
					Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>		
					Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input checked="" type="checkbox"/>			
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data				Focus on lower assembly that the 647.1510 were chipped / scratches to the anodizes		DAS 16 9-09	Scuff Assembly + Re Anodize as per 057005 (mask all 8 screws + washers on lower assembly)	13-3-27	<i>AS</i>	DAS 16 9-09	
Equip/Tooling						057042				057042	
Operator						13/3/27				13/3/27	
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY <i>(Process + Handling)</i>											
Landing Gear				General							
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio							
				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge							
				<input type="checkbox"/> Pressure/Forced Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							
				<input type="checkbox"/> Other							
<i>our process + handling</i>											

Work Order ID 98724***98724***

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Page 2

Item ID: 647.1401

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Upper Cutter Assembly

Stop

NS2Start Date: 3/21/13 Start Qty: 2.00 ***2***

Cust Item ID:

Required Date: 4/04/13 Req'd Qty: 2.00 ***2***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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140

140

Packaging

Identify as per dwg & Stock Location:

0.00

PPP91811 IX

2x

80

Packaging

Memo

0.00

PPP91810 IX

B-3-28

150

150

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

13/3/28 JJ

MCS 13-03-28

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS																	
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>																
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																	
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector												
Doc/Data																							
Equip/Tooling																							
Operator																							
Material																							
Setup																							
Other																							
Process																							
Supplier																							
Training																							
Unapproved																							
FAULT CATEGORY																							
Landing Gear				General																			
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio								<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
																				<input type="checkbox"/> Other			

Picklist Print

March-21-13 12:40:45 PM

Work Order ID: 98724

Parent Item: 647.1401

Parent Item Name: Upper Cutter Assembly

98724
647 1401

Start Date: 3/21/13

Start Qty: 2.00

Required Date: 4/04/13

Required Qty: 2.00

Comments: IPP REV:A 12.10.04 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
646.9701		Manufactured	No		98844		Each	0.0000	**	2	860	13-03-27	
646 9701 Cutter Sub Assembly													
NAS1149FN832P		Purchased	No				Each	8,879.000	**	12			
NAS1149FN832P Washer													

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST294	8879	
115158	79	
122441	200	
123352	200	
123522	400	
123900	8000	

MS27039-08-19	Purchased	No	Each	2,300.000	6
MS27039-08-19					

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST307	700	
123352	600	
123525	100	
st510	1200	
124309	1000	
124859	200	
ST517	400	
124579	400	

12 40 13-03-27

6 13-03-27

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS						
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data												
Equip/Tooling												
Operator												
Material												
Setup												
Other												
Process												
Supplier												
Training												
Unapproved												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled

Picklist Print

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Work Order ID: 98724

98724

Parent Item: 647.1401

647 1401

Parent Item Name: Upper Cutter Assembly

Start Date: 3/21/13

Required Date: 4/04/13

MS21042L08

Purchased

No

Each

3.922.000

6

**

MS210421 08

Nut

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
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ST315	3922	
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122141	3	
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122452	9	
--------	---	--

122814	500	
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123900	3410	
--------	------	--

647.1510

Manufactured

No

Each

0.0000

2

**

647 1510

Upper Deflector

125 082

2

13-03-27

13-03-27

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework	Skid-tube	Crosstube	Water Jet	Engineering						
			Scrap	Machining	Small Fab	Prod. Eng. Coor.	Quality						
			Use-as-is	Thermoforming	Finishing	Rec/Store/Packaging	Other						
NCR No. _____			Work Order Update	Large Fab	Composite	Supplier							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector		
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
Landing Gear	Bending			General			Grain			Ovalized		Pressure/Forced	
	Centre Not Concentric to O/S			Bend			Hardware			Over/Under tolerance		Temperature/Cure	
	Cracks			BOM/Route			Inspection Incomplete			Part Incorrect		Weld	
	Crushed/Crimped			Broken/Damaged			Instructions Incomplete/Unclear			Part Lost/Missing		Wrong Stock Pulled	
	Cuffs			Burrs			Maintenance			Part Moved			
	Heat Treat			Contamination			Mislabeled			Positioned Wrong			
	Inspection Strip in Tube			Countersink			Misread			Power Loss/Surge		Other	
	Ripples in Bend			Cut Too Short			Offset						
	Torque Waves in Extrusion			Drill Holes			Out of Calibration						
	Turning Sequence			Drawing			Out of Sequence						
	Wave/Twist in Tube			Finish			Outside Dimensions						
				Folio									

APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 02962				SHEET 1 OF 1		
	DWG NO. 647.1400		REV: N/C	PREPARED BY R. ROSANO	DATE: 09/01/10		EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.
	DWG TITLE: CUTTER ASSY						
	APPROVED BY:	ENGR 	MFG 	QC 	EFF: CURRENT ORDER		
	TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE	REASON: REPLACED CUTTER BODY IN 647.1401					

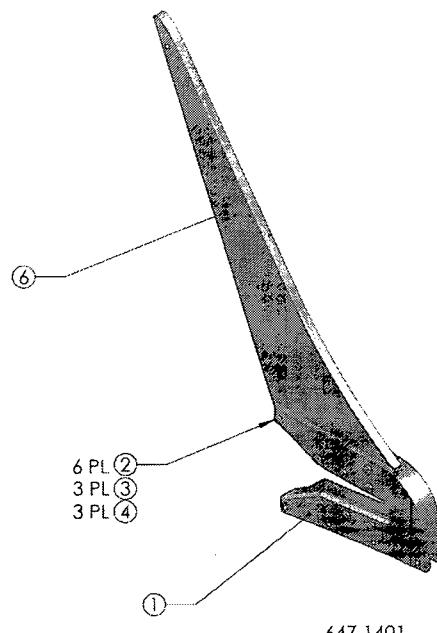
SUPER COPY
PRINTED
9-10-1970
G
VACUUM TIGHT COPY
PRINTED
10-10-1970
RECEIVED
VACUUM TIGHT
98724 MC5
13-03-21

8	A	648.3601		1	CUTTER SUB ASSY			
1	R	646.9701	1		CUTTER SUB ASSY			
F/N	TC	PART NUMBER	1402.1401	QTY	DESCRIPTION	MATERIAL	SPECIFICATION	
DOCUMENTS EFFECTED:					<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> ICA <input checked="" type="checkbox"/> BOM	CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	DER REVIEW <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	REQUIRED

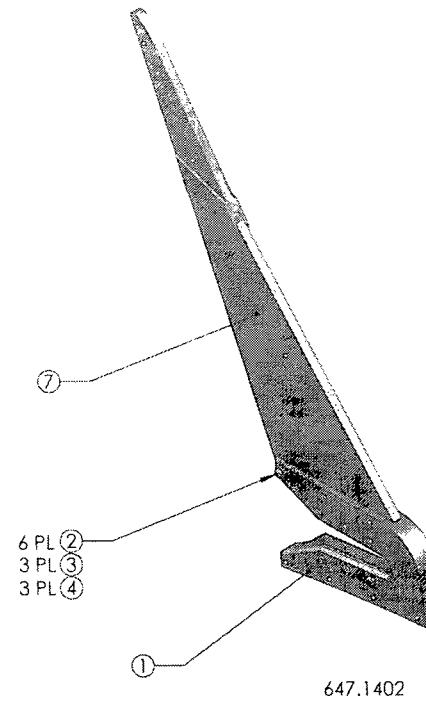
98724

NOTES:

1. IDENTIFY IAW MPP-120
2. APPLY F/N 5 AS REQUIRED TO ALL FAYING SURFACES OF F/N 1, 6, & 7 UPON ASSEMBLY



647.1401



647.1402

UNINCORPORATED ECN(s)

029162

	1	7	647.1501	LOWER DEFLECTOR ASSY		
		1	6	647.1510	UPPER DEFLECTOR	
A/R	A/R	5	601.2045	RTV, LOCTITE 598		
3	3	4	601.1541	NUT	MS21042L08	
3	3	3	601.2765	SCREW	MS27039-0819	
6	6	2	601.2764	WASHER	NAS1149FN832P	
1	1	1	646.9701	CUTTER SUB ASSY		
			647.1402	CUTTER ASSY (LOWER)		
			647.1401	CUTTER ASSY (UPPER)		
.1402	.1401	FIND #	PART #	DESCRIPTION	MATL	SPEC.
PARTS LIST						
QTY	1	1	1	1	1	1
NEXT ASSY (S)	647.1300	647.1300	647.1300	647.1300	647.1300	647.1300
DRAWN BY	CHIEF	CHIEF	CHIEF	CHIEF	CHIEF	CHIEF
DESIGN APPROVAL	PP	PP	PP	PP	PP	PP
CONTRACTOR						
TECH. APPROVALS (RECEIVED)						
DATE CODE	07M26	07M26	07M26	07M26	07M26	07M26
REV	N/C	N/C	N/C	N/C	N/C	N/C
CUTTER ASSY						
647.1400						
SCALE	NONE					
1 SHEET 1 OF 1						

APICAL INDUSTRIES
2608 TEMPLE HEIGHTS DR.
OCEANSIDE, CA. 92356-3512 (760)724-5300
CUTTER ASSY